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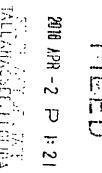
(R∈	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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APR 04 2018 T. LEANEUX



COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & **□\$**52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

:3,

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

R	of A		
(Name of Compare to	n as currently filed with the Florida Dej	of Cines	
Pi	700081A13	or state)	
(Docume	ent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation a	idopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the cor	poration:		
Oba?	Prent LA		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the a	"Inc," or "Co". A professional corpor	oorated" or ration name	the abbreviation
B. <u>Enter new principal office address</u> , if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX			
If amending the registered agent and/or registere new registered agent and/or the new registered or the n		me of the	
Manne of Many Penintered Asset			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		_, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agont-		
I hereby accept the appointment as registered agent. I		ns of the pos	ition.
		20	2016
		<u>.</u>	
		<u></u>	70
Signal	ture of New Registered Agent, if changing	1.3355 AAC	-2 F
		<u> </u>	T C

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				
5) (1)				
5)Change	-	_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
6)Change				
Add				
Remove				

асн вашнопаі зпесі з, Ц	necessary). (Be speci	fic)		
				
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			<u> </u>	
				
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n amendment provides	for an exchange, reck	ssification, or cancel	lation of issued shar	res.
ovisions for immentant	ing the amendment if i	iot contained in the a	menament itseit:	
(if not applicable, indi				
(if not applicable, indi	ΔV_c			
(if not applicable, indi	<u> </u>			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : 3/29/18	
(no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing req document's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder act action was not required.	ion and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required.	nd shareholder
Dated 329/18	
Signature 4	
(By a director, president or other officer - if directors or officer	
selected, by an incorporator – if in the hands of a receiver, tru	stee, or other court
appointed fiduciary by that fiduciary)	
Uga Bent	
(Typed or printed name of person signing)	
President	
(Title of person signing)	